| Electronic Patent Application Fee Transmittal |   |                    |          |        |                         |  |  |
|---|---|--------------------|----------|--------|-------------------------|--|--|
| Application Number:                           | 096   | 09611165           |          |        |                         |  |  |
| Filing Date:                                  | 06-Jul-2000   |                    |          |        |                         |  |  |
| Title of Invention:                           | Web-based managed care system having a common administrative accoun |                    |          |        |                         |  |  |
| First Named Inventor/Applicant Name:          | Joh   | John C. Calhoun    |          |        |                         |  |  |
| Filer:  | Da  | David Aaron Lovell |          |        |                         |  |  |
| Attorney Docket Number:                       | 5044:84   |                    |          |        |                         |  |  |
| Filed as Large Entity                         |   |                    |          |        |                         |  |  |
| Utility under 35 USC 111(a) Filing Fees       |   |                    |          |        |                         |  |  |
| Description                                   |   | Fee Code           | Quantity | Amount | Sub-Total in<br>USD(\$) |  |  |
| Basic Filing:                                 |   |                    |          |        | ı                       |  |  |
| Pages:  |   |                    |          |        |                         |  |  |
| Claims:                                       |   |                    |          |        |                         |  |  |
| Miscellaneous-Filing:                         |   |                    |          |        |                         |  |  |
| Petition:                                     |   |                    |          |        |                         |  |  |
| Patent-Appeals-and-Interference:              |   |                    |          |        |                         |  |  |
| Post-Allowance-and-Post-Issuance:             |   |                    |          |        |                         |  |  |
| Extension-of-Time:                            |   |                    |          |        |                         |  |  |
| Extension - 1 month with \$0 paid             |   | 1251               | 1        | 130    | 130                     |  |  |

| Description                       | Fee Code | Quantity | Amount | Sub-Total in<br>USD(\$) |
|-----------------------------------|----------|----------|--------|-------------------------|
| Miscellaneous:                    |          |          |        |                         |
| Request for continued examination | 1801     | 1        | 810    | 810                     |
|                                   | Tot      | 940      |        |                         |